John Linder
Seventh District of Georgia   Committee on Rules

Congress of the United States
House of Representatives
Washington, DC 20515-1007

PRIVACY ACT AUTHORIZATION AND RELEASE

Note: The Federal Privacy Act requires that this office receive written
authorization under the Act prior to undertaking inquires with Federal
agencies or departments on behalf of a constituent. Upon receipt of a
completed and executed copy of this form, this office will endeavor to make
inquiries on behalf of the constituent and otherwise render such assistance
to the constituent as may be reasonable under the circumstances. However,
neither Congressman Linder nor any member of his staff is authorized or
otherwise able to make final decisions on behalf of any federal, state, or
local department or agency.

--PLEASE PRINT--

NAME: _____

STREET ADDRESS: _____

COUNTY: _____

CITY: _____ **STATE:** Georgia **ZIP CODE:** _____

HOME PHONE: _____ **OFFICE PHONE:** _____

SOCIAL SECURITY NUMBER: _____

VETERAN'S CLAIM NO. (IF APPLICABLE): _____

OTHER IDENTIFYING NO. (IF APPLICABLE): _____

AUTHORIZATION & RELEASE: I hereby authorize and grant permission to U.S.
Congressman John Linder of Georgia's Seventh Congressional District and
members of his congressional staff to make such inquiries of federal, state
and local government agencies and departments and to take other such actions
on my behalf as they may deem necessary or appropriate to assist me with
respect to the subject of this authorization and all matters related thereto,
and I release Congressman Linder and members of his congressional staff of
any liability arising from said inquiries or other actions on my behalf.

SIGNATURE: _____ **DATE:** _____

DESCRIPTION OF PROBLEM OR CONCERN (ATTACH ADDITIONAL SHEET, IF NECESSARY):

_____

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ATTACHMENTS - CORRESPONDENCE & ADDITIONAL INFORMATION: Please attach photocopies of all related correspondence and such additional information as may be necessary to assist in the understanding and handling of your inquiry. Remember to retain copies for your files.

RETURN ADDRESS: Please return your completed form, together with attachments, to:

> Office of U.S. Congressman John Linder
> 2805 Peachtree Industrial Boulevard, Suite 213
> Duluth, GA 30097